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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new non-provisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No. 98-0616.15	Total Pages	PTO 09/652580 00/31/00
	First Named Inventor or Application Identifier Vishnu K. Agarwal		
	Express Mail Label No. EL679497501US		

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification <u>Total Pages 26</u> <small>(preferred arrangement set forth below)</small> -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure	7. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <u>Total Sheets 12</u> <u>Total Pages 4</u>	ACCOMPANYING APPLICATION PARTS
4. Oath or Declaration a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <small>[Note Box 5 below]</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>	8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(where there is an assignee)</small> 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application <small>Statement(s) Status still proper and desired</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Other
5. <input type="checkbox"/> Incorporation By Reference <small>(useable if Box 4b is checked)</small> <small>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</small>	

17. <input type="checkbox"/> Continuation	<input checked="" type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ / _____
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18. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label <input type="checkbox"/> Correspondence address below <small>(Insert Customer No. or Attach bar code label here)</small>					
NAME		Charles B. Brantley II			
ADDRESS		Micron Technology, Inc. 8000 S. Federal Way, Mail Stop 525			
CITY	Boise	STATE	ID	ZIP CODE	83716
COUNTRY	USA	TELEPHONE	(208) 368-4557	Fax	(208) 368-5606

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL		Complete if Known	
		Application Number	
		Filing Date	August 31, 2000
		First Named Inventor	Vishnu K. Agarwal
		Group Art Unit	
		Examiner Name	
TOTAL AMOUNT OF PAYMENT (\$)		690	Attorney Docket Number 98-0616.15

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 09/652580
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<p>METHOD OF PAYMENT (check one)</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number 13-3092, Order No. 98-0616.15</p> <p>Deposit Account Name Micron Technology, Inc.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center; font-weight: bold;">FEE CALCULATION (fees effective 10/01/96)</p> <p>1. FILING FEE</p> <table style="width: 100%;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>690</td> <td>201</td> <td>395</td> <td>Utility filing fee</td> <td>690</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>540</td> <td>207</td> <td>270</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>790</td> <td>208</td> <td>395</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$ 690)</td> </tr> </tbody> </table> <p>2. CLAIMS</p> <table style="width: 100%;"> <thead> <tr> <th></th> <th>Large Entity</th> <th>Small Entity</th> <th>Extra</th> <th>Fee from below</th> <th></th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>3 - 20 =</td> <td>0</td> <td>X</td> <td>\$18</td> <td>=</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td>1 - 3 =</td> <td>0</td> <td>X</td> <td>78</td> <td>=</td> <td>0</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td></td> <td></td> <td>X</td> <td></td> <td>=</td> <td></td> </tr> </tbody> </table> <table style="width: 100%;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>11</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102</td> <td>78</td> <td>202</td> <td>41</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104</td> <td>270</td> <td>204</td> <td>135</td> <td>Multiple dependent claim</td> <td></td> </tr> <tr> <td>109</td> <td>82</td> <td>209</td> <td>41</td> <td>Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110</td> <td>22</td> <td>210</td> <td>11</td> <td>Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$ 0)</td> </tr> </tbody> </table>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	101	690	201	395	Utility filing fee	690	106	330	206	165	Design filing fee		107	540	207	270	Plant filing fee		108	790	208	395	Reissue filing fee		114	150	214	75	Provisional filing fee		SUBTOTAL (1)					(\$ 690)		Large Entity	Small Entity	Extra	Fee from below		Fee Paid	Total Claims	3 - 20 =	0	X	\$18	=	0	Independent Claims	1 - 3 =	0	X	78	=	0	Multiple Dependent Claims			X		=		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	103	18	203	11	Claims in excess of 20		102	78	202	41	Independent claims in excess of 3		104	270	204	135	Multiple dependent claim		109	82	209	41	Reissue independent claims over original patent		110	22	210	11	Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$ 0)	<p>3. 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SUBMITTED BY		Complete (if applicable)			
Typed or Printed Name	Charles Brantley	Reg. Number	38,086		
Signature	<i>Charles Brantley</i>	Date	8/31/00	Deposit Acct. User ID	13-3092, ORDER NO. 98-0616.15